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	UTILITY	Attorney Docket No.				
PATENT APPLICATION		First Inventor	KO-CHUAN CHEN			
* * ** *	TRANSMITTAL	Title	REHABILITATION EQUIPMENT			
(Only for ne	w nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	M039 7530 108			
	APPLICATION ELEMENTS apter 600 concerning utility patent application contents.	ADDRESS TO:	Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450			
(Submit a 2. + Applicar Applicar See 37 ( 3. + Specific (preferred - Descrip - Cross F - Stateme - Referer or a cor - Backgrr - Brief De - Detailtet - Claim(s - Abstrac  4. + Drawing  5. Oath or Decla a. Newl b. Copy (for c	d arrangement set forth below) tive title of the invention Reference to Related Applications ent Regarding Fed sponsored R & D nce to sequence listing, a table, mputer program listing appendix ound of the Invention ummary of the Invention escription of the Drawings (if filed) d Description et of the Disclosure g(s) (35 U.S.C. 113) [Total Sheets 5]	Computer Prog  8. Nucleotide and/or A (if applicable, all nec a. Computer  b. Specifical i. CD- ii. Pap  c. Statemer  ACCOMPAN  9. Assignment F 10. 37 CFR 3.73( (when there is 11. English Trans 12. Information D Statement (ID 13. Preliminary A 14. Return Recei (Should be sp. 15. Certified Cop (if foreign pric 16. Nonpublicatio (b)(2)(B)(i). A or its equivale 17. Other:	P-R in duplicate, large table or ram (Appendix) mino Acid Sequence Submission essary) Reader Form (CRF)  ition Sequence Listing on:  ROM or CD-R (2 copies); or er  ats verifying identity of above copies YING APPLICATION PARTS  Papers (cover sheet & document(s)) b) Statement			
	UING APPLICATION, check appropriate box, and supposing the title, or in an Application Data Sheet under 3		n below and in the first sentence of the			
Continuation Divisional Continuation-in-part (CIP) of prior application No.:						
Prior application information: Examiner  For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
		DENCE ADDRESS				
Customer I	Number or Bar Code Label (Insert Customer No. or A	Attach bar code label here)	OR Correspondence address below			
Name	KO-CHUAN CHEN					
Address	P.O.BOX 55-124.					
City	TAICHUNG	State TAIWAN	Zip Code			
Country	TAIWAN 7	elephone 8864224	26414   Fax886422426417			
Name (Print/Type	KO-CHUAN CHEN	Registration No. (Attorne	y/Agent)			

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PTO/SB/17 (10-03)

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## FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

+ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Compl te if Known						
Application Numb r						
Filing Date						
First Named Inventor	KO-CHUAN CHEN					
Examiner Name						
Art Unit						
Attorney Docket No.						

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
+ Check Credit card Money Other None 3. ADDITIONAL FEES							
Deposit Account:	<u>Large (</u>	Entity	Small	Entity			
Deposit Account	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Number	1051	130	2051	65	Surcharge - late filing fee or oath		
Deposit Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month		
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fee 385	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	·	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional		
Fee from	1501	1,330	2501	665	Utility issue fee (or reissue)		
Total Claims 1 7 -20** = 0 X	1502	480	2502	240	Design issue fee		
Independent 1 200 0 0	1503	640.	2503	320	Plant issue fee		
Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner		
	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$)   Code (\$) 1202 18   2202 9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	].	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims over original patent	1004	770	2004	205	examined (37 CFR 1.129(b))		
1205 18 2205 9 ** Reissue claims in excess of 20	1801 1802	770 900	2801		Request for Continued Examination (RCE)		
and over original patent	1002	900	1802	900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 0	Other fee (specify)						
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic				iling Fo	ee Paid SUBTOTAL (3) (\$)	0	

SUBMITTED BY		(Complete	(Complete (if applicable))			
Name (Print/Type)	KO-CHUAN	CHEN	Registration No. (Attorney/Agent)	Telephone	886 4 22426414	
Signature	: Chem	ko-Chuan		Date	Nov. 27. 2003	

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